

**UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK**

STATE OF NEW YORK, et al.,

Plaintiffs,

v.

UNITED STATES DEPARTMENT  
OF COMMERCE; et al.,

Defendants.

CIVIL ACTION NO. 1:18-cv-2921 (JMF)

**AFFIDAVIT OF KATHERINE  
HARVELL HANEY**

Pursuant to 28 U.S.C. § 1746, I, Katherine Harvell Haney, do hereby depose and state the following:

1. I am the Chief Financial Officer at the Massachusetts Executive Office of Health and Human Services. I have served in this role for the last eleven months. Previous to serving in this role, I spent ten years working in various finance capacities for Masshealth, the MA Department of Elder Affairs and the MA department of Mental Health. I also spent five years as the Budget Director for the Harvard T.H. Chan School of Public Health managing the school's more than \$120,000,000 annual federal grant expenditures.

2. I have either personal knowledge of the matters set forth below or, with respect to those matters for which I do not have personal knowledge, I have reviewed information gathered for me in my capacity as Chief Financial Officer.

3. The Executive Office of Health and Human Services (EOHHS) is the secretariat responsible for approximately fifteen agencies that provide benefits and services to some of Massachusetts' most vulnerable citizens, including children, families, individuals with disabilities and elders. EOHHS works with the agencies within EOHHS to ensure federal grant

requirements such as reporting, state plan compliance and federal match requirements are met so that agencies may draw down federal revenue to cover allowable grant expenditures.

4. Many of the agencies within EOHHS rely on federal grants to fund the services they provide to these vulnerable populations. Many of these federal grants use state population figures from the federal decennial census to determine the amount of funding available under the grant. The Department of Children and Families, the Massachusetts Commission for the Blind, the Department of Public Health, the Department of Mental Health, the Massachusetts Rehabilitation Commission, and the Executive Office of Elder Affairs together receive fourteen different grants that consider state population figures from the decennial census to determine the amount of funding allocated to the Commonwealth.

5. For example, the Massachusetts Rehabilitation Commission (MRC) and the Massachusetts Commission for the Blind (MCB) receive funding from the Vocational Rehabilitation State Grant (VR grant). The VR grant provides funding to state agencies that offer vocational rehabilitation (in Massachusetts, MRC and MCB are the agencies that receive VR grant funds) to pay for services for individuals with disabilities to prepare for and engage in employment with the ultimate goal of achieving economic self-sufficiency. The formula for distributing VR grants to states and territories is to first allocate what the state or territory received in fiscal year 1978. Of the remainder of the funds, one-half is distributed based upon states' general population, as established by the decennial census, and a factor that compares the state's per capita income to the national per capita income; the other one-half is distributed according to the state population, again drawn from decennial census figures, and the square of the per capita income. The larger a state's population, the more funds it will receive, but the higher a state's per capita income compared to the national level, the lower its allotment will be.

In this way, an undercount of low-income residents of a state would have a heightened impact on reducing VR grant funding received by that state.

6. In State Fiscal Year 2018 (SFY18), Massachusetts received approximately \$46 million in VR grant funds. If Massachusetts' share of the population relative to other states were to appear to decrease because of an undercount in the decennial census, the formula used to distribute VR grant funds to states would award less to Massachusetts.

7. Similarly, Community-Based Child Abuse Prevention (CBCAP) Grants are given to state child welfare agencies to support community-based efforts to prevent child abuse and neglect. In SFY18, the Massachusetts Department of Children and Families received approximately \$460,000 in CBCAP funding. Funds are distributed to states based on the number of children under age 18 in each state, which figure is drawn from decennial census data. If the population of children under 18 in Massachusetts were to appear to decrease relative to other states because of an undercount in the census, the formula used to distribute the CBCAP Grants would award less to Massachusetts. In this way, even if there is little to no net undercounting of the national population, if the Massachusetts population of children under 18 were to be disproportionately undercounted as compared to other states, the Massachusetts' percentage of all children under 18 in the nation would appear to decrease, and Massachusetts' share of CBCAP grants would also decrease.

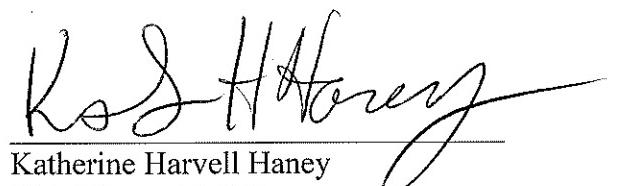
8. Finally, the Older Americans Act (OAA) Grants for State and Community Programs on Aging are given to state agencies designated as "State Units on Aging" and used to support the state's over 60 population to fund home and community-based services, such as home-delivered meal and other nutrition programs, in-home services, transportation, legal services, elder abuse prevention and caregiver support. In SFY18, the Executive Office of Elder

Affairs received approximately \$26 million in OAA funding. Each state receives OAA funds according to a formula based on the state's share of the national population of seniors, age 60 and older, as assessed by the decennial census. If the population of 60 and older residents in Massachusetts were to appear to decrease relative to other states' populations of residents aged 60 and older because of an undercount in the decennial census, the formula used to distribute OAA funds to states would award less to Massachusetts.

9. If there is an undercount of eligible populations in Massachusetts as compared to other states, Massachusetts would receive less funding even though the actual number of individuals in the eligible populations has not decreased.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 24, 2018.



Katherine Harvell Haney  
Chief Financial Officer  
Executive Office of Health and Human Services  
Commonwealth of Massachusetts